PTO/SB/30 (10-01)

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## REQUEST **FOR** CONTINUED EXAMINATION (RCE) **TRANSMITTAL**

Address to: Mail Stop RCE **Commissioner for Patents** P.O. Box 1450

Alexandria, VA 22313-1450

| Application Number     | 09/910,542                    |
|------------------------|-------------------------------|
| Filing Date            | July 20, 2001                 |
| First Named Inventor   | Alwan et al.                  |
| Art Unit               | 2879                          |
| Examiner Name          | K. Guharay                    |
| Attorney Docket Number | 2269-7134.1US (95-0654.01/US) |

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

| Submission required under   | r 37 C.F.R. 1.114   |  |                      |        |  |  |
|---|---|--|----------------------|--------|--|--|
| a. 🛛 Previously submitted   |   |  |                      |        |  |  |
| (Any unentered amer   | (Any unentered amendment(s) referred to above will be entered). |  |                      |        |  |  |
| iii. Dther  |   |  |                      |        |  |  |
| b. Enclosed   | closed  |  |                      |        |  |  |
| i. Amendment/Reply ii Affidavit(s)/Declara  |   | ☐ Information I☐ Other                   | Disclosure Statement | (IDS)  |  |  |
| 2. Miscellaneous  |   |  |                      |        |  |  |
| a. Suspension of action on the above-identified application is requested under 37 C.F.R. 1.103(c) for a period ofmonths. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. 1.17(i) required) |   |  |                      |        |  |  |
| b.  |   |  |                      |        |  |  |
| 3. Fees The RCE fee under 37 C.F.R. 1.17(e) is required by 37 C.F.R. 1.114 when the RCE is filed.   |   |  |                      |        |  |  |
|   |   |  |                      |        |  |  |
| <ul> <li>a.          \int The Director is hereby authorized to charge <u>any deficiency in</u> the following fees, or credit any overpayments, to         Deposit Account No. <u>20-1469</u></li> </ul>         |   |  |                      |        |  |  |
| <u>=</u>  | =   |  |                      |        |  |  |
| ii. Extension of time fee (37 C.F.R. 1.136 and 1.17)  |   |  |                      |        |  |  |
| iii.  |   |  |                      |        |  |  |
| c. Payment by credit card (Form PTO-2038 enclosed   |   |  |                      |        |  |  |
| WARNING: Information on this form may become public. Credit card information should not   |   |  |                      |        |  |  |
| be included on this form. Provide credit card information and authorization on PTO-2038.  |   |  |                      |        |  |  |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED   |   |  |                      |        |  |  |
| Name (Print /Type) Krista Weber I   | Powell  | Registration No. (Attorney/Agent) 47,867 |                      | 47,867 |  |  |
| Signature Kurll   |   | Date February 22, 2007                   |                      |        |  |  |
| CERTIFICATE OF MAILING  |   |  |                      |        |  |  |

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Date of Deposit: February 22, 2007 Person Making Deposit: Di Sanders

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